

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449/PTO				Complete if Known
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				
(Use as many sheets as necessary)				
Sheet	1	of	2	Attorney Docket Number
				4991-0106PUS1
Application Number				10/562,812-Conf. #6563
Filing Date				December 27, 2005
First Named Inventor				Hironobu INAMASU
Art Unit				1797
Examiner Name				N. N. Bhat

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature	Date Considered	
-----------------------	--------------------	--

⁷EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 604. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ⁸Applicant's unique citation designation number (optional). ⁹See Kind Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ¹⁰Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ¹¹For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ¹²Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ¹³Applicant is to place a check mark here if English language Translation is attached.

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Substitute for form 1449/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				Application Number	10/562,812-Conf. #6563
(Use as many sheets as necessary)				Filing Date	December 27, 2005
				First Named Inventor	Hironobu INAMASU
				Art Unit	1797
				Examiner Name	N. N. Bhat
Sheet	2	of	2	Attorney Docket Number	4991-0106PUS1

NON-PATENT LITERATURE DOCUMENTS

Examiner Signature _____ Date Considered _____

***EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.**

**Applicant's unique citation designation number (optional). *Applicant is to place a check mark here if English language Translation is attached.*